

INTERCOUNTY ELECTRIC COOPERATIVE

PO BOX 209/102 Maple Avenue, Licking, MO 65542 Phone: 866-621-3679

LANDLORD RENTAL AGREEMENT FOR ELECTRIC SERVICE

ATTENTION: Please have the landlord complete this form and return.

This form is required before service can be connected in the renter's name.

I/ We as Owner / Owner's Agent of the property located at

Street Address City State Zip Meter Pole (Map Location) Number

confirm that the previous tenant/tenants (not the landowner) _____
Name

are no longer living at the above location & all adults living at this location now are listed below.
On this date _____, the tenant listed below is renting/leasing above mentioned
property. **This form must be submitted within 21 days to be considered valid.**

Name of Tenant/Member and/or Spouse

Other Individuals over 18 living in the residence

I/We as Owner/Owner's Agent attest that the information on this application is accurate and
true to the best of my knowledge.

Landlord/Owner's Printed Name (or rental agency) Home Telephone Number Work or Cell Phone Number

X _____
Signature of Landlord / Owner / Property Manager Date Email

Notify landlord via email when service disconnect order is generated.

**Tenant MUST
have SmartHub
account set up.**

Landlord's Email Address

In order to ensure continuous availability of utilities, some property owners and rental agents require notification
that a tenant is discontinuing service as a condition of rental.

By initialing, I agree that my landlord or his agent may be automatically notified via email when a disconnection
notice is generated by IECA. X _____
Initials of Tenant Date

Tenant's Phone Numbers: Cell: _____ Home: _____ Work: _____

X _____
Tenant / Renter / Leasee Signature Social Security Number

X _____
Tenant / Other Signature Social Security Number

Landlord

Disconnect Notice
Approval

Renter